Ethical Problems in End-of-Life Decisions for Elderly Norwegians

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October 16, 2009

Study Purpose
- Explore ethical problems experienced in end-of-life decision-making in Norway:
  - Health care professionals
  - Elders
  - Family members
- Framework: Contractual/Community Model

Method
- Research conducted in 2005
- Interviews about end-of-life decision making with health professionals, elders, and family members
- Open-ended questions
- Ethical analysis framework used to identify ethical problems, resolutions, and rationale for responding to problem

Results: Health Care Professionals
- Nurses, physicians, ministers, social worker (n = 25)
- Setting – nursing homes, hospital, home care organizations, hospices, education

Results: Elders
- 2 men and 4 women (n = 6)
- Mean age was 80

Themes
- Concern about care or treatment given at the end of life
- Concern about making decisions for themselves or others
- Discussion with family members
- Quality of health care services

Health Professional Ethical Problems: Themes
- Interacting with family members
- Quality of healthcare services
- Disagreement among health care professionals
- Treatment decisions
- Involving elders in decision making
- Reluctance to talk about death
- Managing own feelings and burdens of caregiving
- Meeting spiritual needs
Results: Family Members

- n = 5
- Mean age = 54
- Place of parental death was at nursing home (4) or hospital (1)

Themes
- Dissatisfaction with health care services
- Discussion of or involvement with end-of-life care
- Concerns about other family members

Discussion
- Quality of health care services
- Interactions with family members
- Talking about and planning for death
- Treatment decisions

Implications for Practice
- Recognizing “when the time has come”
  - Dialogue between health professionals
  - Development of communication guidelines for working with family members
- Integrate a palliative care philosophy

The Nurses’ Stories

Communication Themes
- Being present
- Knowing what to say and when to say it
- Responding to patient and family wishes and hopes
- Understanding the spiritual journey
- Responding to conflict
- Advocating: When nurses need to take action
- Saying goodbye

Ethical Framework: Value, Be, Do Model
- What should I value?
- Who should I be?
- What should I do?

Ethical Problem

What should you do when patient and family do not want to talk about the end-of-life?

“I've spoken to relatives who won't discuss it, because they don't want to depress the patient."

Analysis – Value, Be, Do

Coping with Challenges

“Finding meaning and purpose in your work can counteract the negative consequences of stress.” (p. 225)

“Only in taking care of ourselves can we make a positive difference in the lives of patients and families who are on an end-of-life journey.” (p. 227)


Ethical Problem

What should you do when a patient is dying and family members are not ready to say goodbye?

“I think that is the strategy—to walk with them in the process and not tell them what it should be.”

Analysis – Value, Be, Do

The Rewards

“It’s about the grandfather and his grandson. …When the boy visited his grandfather, the boy would just cry all the time. It was difficult for the grandfather.....I talked to him about the grandson. I told him that he needed to be there—even though he cried. The grandfather didn’t respond to me, but when the boy came back into the room again, the grandfather opened his arms and said ‘come here and sit by my side. I have to tell you how I love you.’ ….I think it helped this boy for the rest of his life.”